

# Stillbirth Clinical Care Standard

November 2022



**I acknowledge the traditional owners of Country throughout  
Australia, and their continuing connection  
to land, sea and community. I pay my respects to them  
and their cultures, and to elders both past and present.**

**We also acknowledge women and families who have experienced a stillbirth. We recognise the tragedy of every perinatal loss, regardless of the nature of the loss or the gestational age at which the loss occurs.**



**In Australia,  
six babies are  
stillborn every day.**



*Australian Institute of Health and Welfare.  
Stillbirth and neonatal deaths in Australia 2017  
and 2018. Canberra: AIHW; 2021.*

**The experience  
of stillbirth is  
traumatic and  
profound.**

**It has significant  
and far-reaching  
impacts on  
families and  
societies.**



# There are equity gaps in stillbirth rates in Australia.





**Not all stillbirths  
are preventable.**

**But there is  
evidence that  
20-30% of deaths  
could be prevented  
with optimal care.**



AUSTRALIAN COMMISSION  
ON SAFETY AND QUALITY IN HEALTH CARE



**Stillbirth**  
Clinical Care Standard

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The Stillbirth Clinical Care Standard was developed in response to an action in the **National Stillbirth Action and Implementation Plan.**





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The Standard will help  
**embed best-practice care**  
for stillbirth prevention,  
bereavement and follow-up  
care across Australia.

## Stillbirth Clinical Care Standard

### Quality statements

- 1 Stillbirth risk assessment before pregnancy**  
A woman intending pregnancy is offered pre-conception care that supports her to identify and manage stillbirth risks and improve her chance of giving birth to a healthy live-born baby.
- 2 Stillbirth risk assessment during pregnancy**  
A woman's risk factors for stillbirth are identified early, monitored and managed with evidence-based care throughout her pregnancy. She is offered the most appropriate available model of maternity care for her clinical, personal and cultural needs.
- 3 Stillbirth awareness and strategies to reduce risk**  
Early in pregnancy, a woman is informed about stillbirth as a potential outcome. Throughout the pregnancy, she is supported to adopt strategies that may reduce her risk of stillbirth, including smoking cessation, using a side going-to-sleep position from 28 weeks gestation and being aware of fetal movements.
- 4 Ultrasound during pregnancy**  
A woman is offered high-quality ultrasound during pregnancy to assess fetal growth and morphology, and identify stillbirth risks. Ultrasound performance and reporting, and communication of outcomes to the woman, are in line with current best-practice guidelines.
- 5 Change in fetal movements**  
A woman who contacts her clinician or health service with concerns about a change in the frequency, strength or pattern of her baby's movements is offered timely assessment and care according to the Decreased Fetal Movement Care Pathway developed by the Centre of Research Excellence in Stillbirth and the Perinatal Society of Australia and New Zealand, or a locally approved alternative.
- 6 Informed decision-making about timing of birth**  
A woman is provided with information that enables her to make informed decisions about timing of birth, in line with her individual risks and preferences. Whenever a planned birth is being considered, including when there are concerns about maternal or fetal health, the potential benefits and harms are discussed with the woman and documented appropriately.
- 7 Discussing investigations for stillbirth**  
When a stillbirth is diagnosed, the availability, timing and anticipated value of clinical investigations, including autopsy, are discussed with the parents. The parents are supported to share their views about factors they perceive may have contributed to the stillbirth, including aspects of the woman's clinical care. This information is documented and considered alongside the agreed clinical investigations, and as part of local perinatal mortality audit or incident investigation processes.
- 8 Reporting, documenting and communicating stillbirth investigation results**  
The results of stillbirth investigations are reported in a timely manner, documented appropriately and discussed with the parents, along with any information they have provided about perceived contributing factors. The stillbirth is reviewed as part of a local perinatal mortality audit process, classified according to the Perinatal Society of Australia and New Zealand classification system, and outcomes are used to inform local improvements in care.
- 9 Bereavement care and support after perinatal loss**  
After a perinatal loss, parents and their support people are provided with compassionate, respectful and culturally safe bereavement care that recognises their specific needs and preferences, and ensures that follow-up support is available after discharge.
- 10 Subsequent pregnancy care after perinatal loss**  
During a subsequent pregnancy after a perinatal loss, a woman receives antenatal care that recognises factors that may have contributed to the previous loss, and ensures that she has access to appropriate clinical expertise and psychosocial support, as required.

## Quality statements and related indicators work collectively to:

- ✓ Reduce the number of women experiencing stillbirth
- ✓ Reduce unwarranted clinical variation in the prevention and investigation of stillbirth
- ✓ Support best practice in bereavement care for parents following any perinatal loss

# Reducing the risk of stillbirth

## QUALITY STATEMENTS

- 1** Stillbirth risk assessment before pregnancy
- 2** Stillbirth risk assessment during pregnancy
- 3** Stillbirth awareness and strategies to reduce risk
- 4** Ultrasound during pregnancy
- 5** Change in fetal movements
- 6** Informed decision-making about timing of birth

# Investigations after stillbirth

## QUALITY STATEMENTS

- 7** Discussing investigations for stillbirth
- 8** Reporting, documenting and communicating stillbirth investigation results

# Supporting parents after any perinatal loss

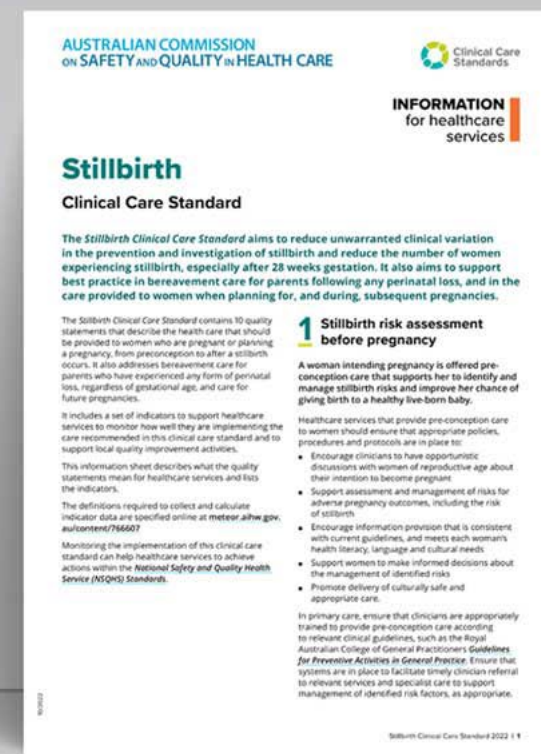
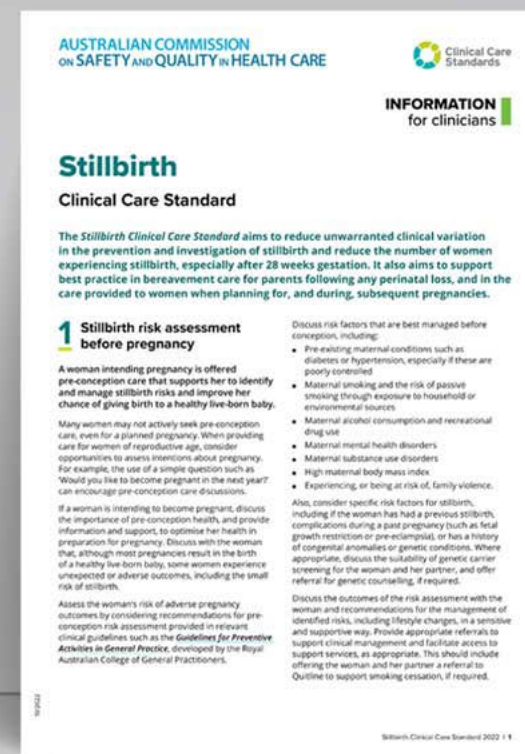
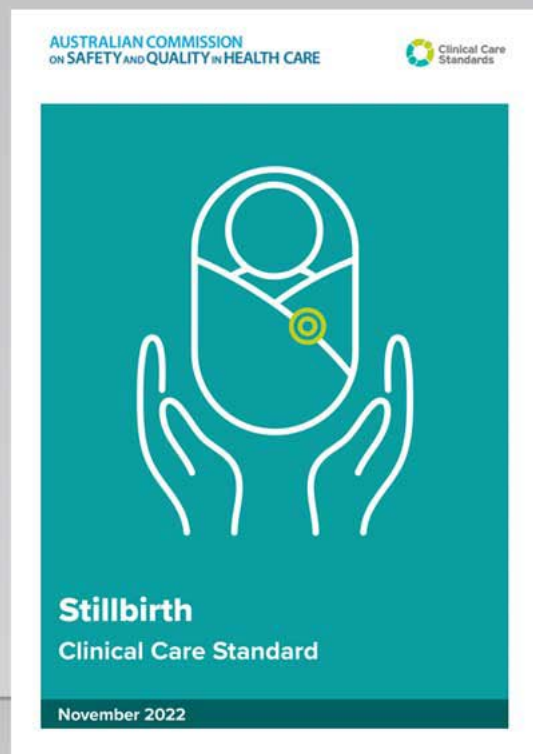
## QUALITY STATEMENTS

**9** Bereavement care and support  
after perinatal loss

**10** Subsequent pregnancy care  
after perinatal loss



■ Cultural safety and equity



**Clinical Care Standard**

**Information for women and parents**

**Information for clinicians**

**Information for healthcare services**



**Every stillbirth is a  
tragedy.**

**Every stillbirth we can  
prevent, matters.**



[safetyandquality.gov.au/stillbirth-ccs](https://safetyandquality.gov.au/stillbirth-ccs)

